



Mailing address: 880 EAST HASTINGS, VANCOUVER BC V6A 1R6  
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TEL: 604-255-1844 FAX: 604-255-1845  
www.CannabisDispensary.ca  
Retail locations: 880 E Hastings St, Vancouver BC - 1182 Thurlow St, Vancouver BC  
Canada-wide mail order service!

## REQUEST FOR RELEASE OF INFORMATION TO THE VANCOUVER DISPENSARY SOCIETY

This form has been designed to ensure that confidentiality is a respected right, and to make provisions for the exchange of relevant information between service workers.

Therefore, I,

\_\_\_\_\_ hereby request that my:

Patient's Name

- Physician's statement and/or prescription

- Confirmation of membership

- Confirmation of diagnosis

- Other \_\_\_\_\_

be released from \_\_\_\_\_

and forwarded to **The Vancouver Dispensary** (fax 604-255-1845).

*This is ROI is intended for those seeking membership within The Vancouver Dispensary Society.*

This consent is valid for one time only, and additional releases of information will require my consent. The person/organization to whom my information is being released is prohibited from further sharing without my written authorization.

PATIENT'S NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

MEMBERSHIP NUMBER (IF APPLICABLE): \_\_\_\_\_

DATE: \_\_\_\_\_